## STATE OF MAINE



COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES

Mail: 135 State House Station, Augusta, Maine 04333-0135 Office: 242 State Street, Augusta, Maine

Tel: (207)287-4179 FAX: 287-6775 Website: www.maine.gov/ethics

## STATEMENT OF SOURCES OF INCOME 1 M.R.S.A. §§ 1016-A et seq.

COVERING THE CALENDAR YEAR JANUARY 1, 2006 THROUGH DECEMBER 31, 2006

FULL NAME: Patricia A Blanchetto	Please check the appropriate box and fill in the District number.
MAILING ADDRESS: 2 Old Orchard Drive	Member of the Senate, District
CITY: <u>Bangot Me</u> zip code: <u>0440</u> /	
phone number: <u>942-8692</u>	Member of the House, District

## GENERAL INSTRUCTIONS

1. Please file this statement with the Clerk of the House or the Secretary of the Senate by:

## 5:00 p.m. on February 15, 2007.

- The report covers you, your spouse, and your dependent children.
- 3. Report only specific sources of income. Dollar amounts need not be listed.
- 4. Campaign contributions duly recorded as required by law need not be reported in this statement.
- 5. Attach additional sheets if needed. Label attachments with your name, address, and the date.
- 6. Please sign on Page 4.

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- 7. The completed statements will be posted as a 'pdf' on the Commission's website.
- 8. State law (1 M.R.S.A. § 1018) requires Legislators to file an updated statement with the Commission within 30 days of any change to the information relating to the preceding year. Additionally, the law (1 M.R.S.A. § 1016-B (2)) requires Legislators to make a supplementary statement to the Commission of any reportable liability within 30 days after it is incurred.

PLEASE KEEP A COPY OF THIS STATEMENT FOR YOUR FILES.	
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Disclosure statements are made available to members of the public upon request.

Thank you for your cooperation.

PART I. INCOME DERIVED FROM EMPLOYMENT BY ANOTHER. Name each employer from whom you received compensation of \$1,000 or more. Specify also the principal type of economic activity of each employer.

Name of Employer	Address	Principal Type of Economic Activity of Employer
ity of Bangor	73 Harlow St Broker No	ecount City Council
	1	
Enter the name and add	FED FROM SELF-EMPLOYMENT. (For Leg ress of your business, if any, and list the major are with a partnership, firm, professional association, out entity.	as of economic activity from which you derive
Name and Address of Business Entity	Major Areas of Economic Activity (self)	Major Areas of Economic Activity  (partnership, association or similar business entity
*		and the state of t
		**************************************
\$1,000, whichever is gre	come derived from self-employment that represent eater, and specify the principal type of economic af this form of disclosure is prohibited by law, rule,	activity of the entity or person from whom yo
\$1,000, whichever is grederived such income. If	eater, and specify the principal type of economic a	activity of the entity or person from whom you , or an established code of professional ethics
\$1,000, whichever is grederived such income. It specify only the principal	eater, and specify the principal type of economic a f this form of disclosure is prohibited by law, rule, al type of economic activity of the entity or person	activity of the entity or person from whom you or an established code of professional ethics of from whom the income was derived.  Principal Type of Economic Activity of Entity or Person Who Is the
\$1,000, whichever is grederived such income. It specify only the principal	eater, and specify the principal type of economic a f this form of disclosure is prohibited by law, rule, al type of economic activity of the entity or person	activity of the entity or person from whom you, or an established code of professional ethics of from whom the income was derived.  Principal Type of Economic Activity of Entity or Person Who Is the
\$1,000, whichever is grederived such income. It specify only the principal	eater, and specify the principal type of economic a f this form of disclosure is prohibited by law, rule, al type of economic activity of the entity or person	activity of the entity or person from whom you, or an established code of professional ethics of from whom the income was derived.  Principal Type of Economic Activity of Entity or Person Who Is the
\$1,000, whichever is greaterived such income. It specify only the principal Name of Source  RT III. MAJOR AREAS tice. If associated with a little such a second sec	eater, and specify the principal type of economic as f this form of disclosure is prohibited by law, rule, al type of economic activity of the entity or person  Address  SOF PRACTICE. (For Legislators who are attellaw firm, list the major areas of practice of your fi	activity of the entity or person from whom you or an established code of professional ethics of from whom the income was derived.  Principal Type of Economic Activity of Entity or Person Who Is the Source of Income
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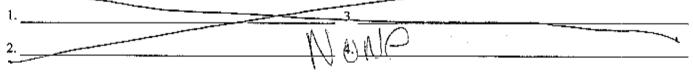
PART IV. OTHER SOURCES OF INCOME. Name each source of income of \$1,000 or more not listed in Parts I, II, or III of this form. Do not include gifts. If none, so state.

Name of Source	<u>Address</u>	Kind of Income
1.		
2		
3:	WONE	

PART V. DISCLOSURE OF REPORTABLE LIABILITIES. List the names of creditors for any unsecured loans of \$3,000 or more that you received during the reporting period, and list the major areas of economic activity of each creditor. Do not list loans from a relative. If none, so state.

Name of Creditor	Address of Creditor	Principal Type of Economic Activity of Creditor
1.		
2.		
	MONE	

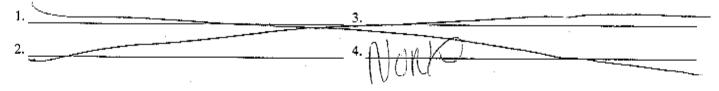
PART VI. DISCLOSURE OF GIFTS. Name the specific source of each gift of more than \$300. Include gifts with an aggregate value of more than \$300 from a single source. If none, so state.



PART VII. DISCLOSURE OF HONORARIA. List the source of any honoraria accepted for appearances or speeches related to your official duties. If none, so state.



PART VIII. REPRESENTATION BEFORE STATE AGENCIES. Identify each executive branch agency before which you represented or assisted others for compensation of any amount. If none, so state.



PART IX. BUSINESS WITH STATE AGENCIES. Ide your immediate family sold goods or services with a value it	ntify each executive branch agency to which you or a member of n excess of \$1,000 during the reporting period. If none, so state.
1. Wane	
	of income of \$1,000 or more received by your spouse or dependent are represented. Do not include gifts. Indicate (S) beside sources of
Type of Economic Activity  Representing Each Source of  Income Received	Kind of Income
InJames E Blankhette	retirement MSEA.
2. Inmes E Bharhelle	515 Social Security
3	. '
4	
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appears that a Legislator has willfully filed a false Attorney General. If the Commission determines statement or has willfully filed a false statement, t interest on every question and shall be precluded branch of the Legislature, and shall not attempt to	that a Legislator has willfully failed to file a required the Legislator shall be presumed to have a conflict of from voting on any question in committee or in either o influence the outcome of any question. A Legislator ubject to a civil penalty not to exceed \$1,000, payable to
Lotswin a Blunchoth	2 - 1 - 2007 Date